



State of New Jersey

Christine Todd Whitman
Governor

Department of Environmental Protection

Robert C. Shinn, Jr.
Commissioner

Waste Compliance & Enforcement & Release Prevention
Bureau of Hazardous Waste Compliance & Enforcement - North
1259 Route 46 East, Building 2
Parsippany, New Jersey 07054-4191
Tel #: (973) 299-7571
Fax #: (973) 299-7576

March 10, 1999

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Robert Perretti
17 Byram Bay Road
Hopatcong, NJ 07843

Re: Notice of Violation
Pat Perretti Freight Service, Incorporated
EPA ID# NJD 000692343

Dear Mr. Perretti:

Attached is a Notice of Violation being issued to you based on your ownership and/or operation of the above named company, located at 73 Green Pond Road, Rockaway Township, New Jersey. An inspection of the facility on December 14, 1998 showed the presence of identified hazardous and non-hazardous wastes left behind in an abandoned box trailer when the company moved from the site approximately one year earlier.

The violations cited are N.J.A.C. 7:26G-12.1(a), specifically 40 C.F.R. 270.10, operating a Treatment, Storage, and Disposal Facility without first submitting a Part A/Part B Permit Application; N.J.A.C. 7:26G-8.1(a), specifically 40 C.F.R. 264.171, failing to handle hazardous wastes in proper containers; N.J.A.C. 7:26G-8.1(a), specifically 40 C.F.R. 264.173, failing to comply with container management requirements; N.J.A.C. 7:26G-8.1(a), specifically 40 C.F.R. 264.175(b)(1), failing to have an adequate containment system; N.J.A.C. 7:26G-8.1(a), specifically 40 C.F.R. 264.176, failing to store containers holding ignitable or reactive wastes at least 50 feet from the property line; and N.J.A.C. 7:26G-8.1(a), specifically 40 C.F.R. 264.178, failing to remove all wastes at closure of facility.

210 to Follow JS

If there are any questions on this matter, contact this Office at (973) 299-7571.

Very truly yours,

Thomas Brady

Thomas Brady, Investigator 1
Bureau of Hazardous Waste
Compliance & Enforcement

cc: file
USEPA Region II ✓
Rockaway Twp. Health Department

100-100000-1000
NOV 12 1985
EPA-REGION II

completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received (For Official Use Only)

PH 11:48

30

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☒

B. Subsequent Notification (Complete Item C)

C. Installation's EPA ID Number

N J D 0 0 0 6 9 2 3 4 3

II. Name of Installation (Include company and specific site name)

P A T P E R R E T T I F R E I G H T S E R V I C E I N C.

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

3 3 5 B R O W N T R A I L

Street (Continued)

City or Town

H O P A T C O N G

State

Zip Code

N J 0 7 8 4 3 -

County Code

County Name

0 3 9 S U S S E X

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

7 3 G R E E N P O N D R O A D

City or Town

R O C K A W A Y

State

Zip Code

N J 0 7 8 6 6 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

H O W E L L

(First)

D O U G L A S

Job Title

O P E R A T I O N S M N G .

Phone Number (Area Code and Number)

2 0 1 - 6 2 5 - 3 3 0 0

VI. Installation Contact Address (See Instructions)

A. Contact Address

Location Mailing Other

☐☒☐

B. Street or P.O. Box

City or Town

R O C K A W A Y

State

Zip Code

N J 0 7 8 6 6 -

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

P A T P E R R E T T I

Street, P.O. Box, or Route Number

7 3 G R E E N P O N D R O A D

City or Town

R O C K A W A Y

State

Zip Code

N J 0 7 8 6 6 -

Phone Number (Area Code and Number)

2 0 1 - 6 2 5 - 3 3 0 0

B. Land Type

☐

C. Owner Type

☐☒

D. Change of Owner Indicator

☐☒☐☐☐☐☐☐☐☐

(Date Changed)

Month

Day

Year

HAZARDOUS & SOLID WASTE PROGRAMS
94 SEP 27 PM 11:48
AGENCY RO II

No: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

(as required by Post Office)

The sole intention for this notification is for modifying the MAILING ADDRESS ONLY.

XI. Comments

Signature

Name and Official Title (Type or print)

Date Signed

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

X. Certification

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an LD number; see instructions.)

1	2	3	4	5	6
7	8	9	10	11	12

B. Listed Hazardous Wastes. (See 40 CFR 261.51 - 53; see instructions if you need to list more than 12 waste codes.)

1. Volatile (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Flammable (D004)	5. Toxic (D005)	6. Other (D006)
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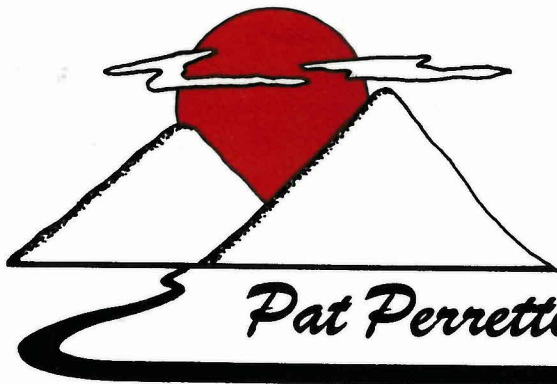
A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; see 40 CFR Parts 261.50 - 261.54)

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

1. Generator (see instructions)	2. Transporter (indicate mode in boxes 1-6)	3. For own waste only	4. For commercial purposes	5. Mode of Transportation	6. Other - specify
1. Greater than 1000 kg/mo (2,200 lbs.)	2. 100 to 1000 kg/mo (200-2,200 lbs.)	3. Less than 100 kg/mo (220 lbs.)	4. Water	5. Highway	6. Other - specify
1. Greater than 1000 kg/mo (2,200 lbs.)	2. 100 to 1000 kg/mo (200-2,200 lbs.)	3. Less than 100 kg/mo (220 lbs.)	4. Water	5. Highway	6. Other - specify
1. Greater than 1000 kg/mo (2,200 lbs.)	2. 100 to 1000 kg/mo (200-2,200 lbs.)	3. Less than 100 kg/mo (220 lbs.)	4. Water	5. Highway	6. Other - specify

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; refer to instructions)

1. Used Oil Fuel Burner	2. Used Oil Direct Shipment or Used Oil to Off-Specification Burner	3. Used Oil Burner - indicate type(s) of Combustion Device(s)	4. Used Oil Burner - indicate type(s) of Combustion Device(s)	5. Used Oil Transporter - indicate type(s) of Activity(ies)	6. Used Oil Processor/Refiner - indicate type(s) of Activity(ies)	7. Process	8. Recycling
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Pat Perretti Freight Service, Inc.

■ SPECIALIZING IN HAZARDOUS WASTE TRANSPORTATION & DISPOSAL ■

September 21, 1994

Mr. Jack Hoyt
US EPA REGION II
Air & Waste Management Division
Attn.: RCRA Notifications
26 Federal Plaza, Room 505
New York, New York 10278

U.S. EPA
AGENCY RO II
94 SEP 27 PM 11:48
HAZARDOUS & SOLID WASTE
PROGRAMS BRANCH

Dear Mr. Hoyt:

Attached please find completed EPA Form 8700-12 subsequent notification in respects to the change of the MAILING ADDRESS as required by the Post Office, for Pat Perretti Freight Service, Inc. EPA ID No.: NJD000692343.

Should you have any questions or comments, please contact me at (201) 625-3300.

Sincerely,

Pat Perretti Freight Service, Inc.

Douglas W. Howell
Operations Manager

DWH/cp

enclosure



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

10/03/94

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJD000692343

FACILITY NAME -> PAT PERRETTI FREIGHT SERVICE INC

MAILING ADDRESS -> 73 GREENPOND RD
ROCKAWAY, NJ 07866

INSTALLATION ADDRESS -> 335 BROWN TRAIL
HOPATCONG, NJ 07843

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: HOWELL, DOUGLAS
PRESIDENT
PAT PERRETTI FREIGHT SERVICE INC
73 GREENPOND RD
ROCKAWAY, NJ 07866

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

EPA		U.S. ENVIRONMENTAL PROTECTION AGENCY		NOTIFICATION OF HAZARDOUS WASTE ACTIVITY	
INSTALLATION'S EPA I.D. NO.		I. NAME OF INSTALLATION		II. INSTALLATION MAILING ADDRESS	
III. LOCATION OF INSTALLATION		PLEASE PLACE LABEL IN THIS SPACE (not in book)		INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).	
FOR OFFICIAL USE ONLY					
COMMENTS					
INSTALLATION'S EPA I.D. NUMBER					
APPROVED					
DATE RECEIVED (yr., mo., & day)					
I. NAME OF INSTALLATION					
II. INSTALLATION MAILING ADDRESS					
STREET OR P.O. BOX					
CITY OR TOWN					
ST. ZIP CODE					
III. LOCATION OF INSTALLATION					
STREET OR ROUTE NUMBER					
CITY OR TOWN					
ST. ZIP CODE					
IV. INSTALLATION CONTACT					
NAME AND TITLE (last, first, & job title)					
PHONE NO. (area code & no.)					
V. OWNERSHIP					
A. NAME OF INSTALLATION'S LEGAL OWNER					
B. TYPE OF OWNERSHIP (enter the appropriate letter into box)					
VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))					
VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))					
VIII. FIRST OR SUBSEQUENT NOTIFICATION					
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.					
C. INSTALLATION'S EPA I.D. NO.					
IX. DESCRIPTION OF HAZARDOUS WASTES					
Please go to the reverse of this form and provide the requested information.					

I.D. - FOR OFFICIAL USE ONLY									
1	2	3	4	5	6	7	8	9	10
W	A	J	D	O	P	O	6	9	234321

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F003	2 F005	3 F017	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 K078	14 K022	15 K086	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 U002	32 U004	33 U031	34 U112	35 U140	36 U154
37 U159	38 U161	39 U220	40 U239	41 U188	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE Pat Penetti	NAME & OFFICIAL TITLE (type or print) P. A. PRES.	DATE SIGNED 8/14/80
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NJ D000692342



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

PAID
MAR 10 1989
ENVIRONMENTAL
NEW YORK

EPA ID NUMBER

NJ D000692342

DAT PERRETTI FREIGHT SERVICE INC
335 BROOK TRAIL
HOPATCONG NJ 07843

INSTALLATION ADDRESS

335 BROOK TRAIL
HOPATCONG NJ 07843



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION II
26 FEDERAL PLAZA

NEW YORK, NEW YORK 10278

February 9, 1981

MAR 3 1981

PAB
MAR 10 3 48 PM '81
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

NJT000014886

PAT PERRETTI FREIGHT SERVICE INC

335 BROWN TR
HOPATCONG

NJ 07843

Dear Sir:

The United States Environmental Protection Agency (EPA) regulates the handling of hazardous wastes under the Resource Conservation and Recovery Act (RCRA) 42 U.S.C. §6901 et seq. Under Section 3010 of RCRA, 42 U.S.C. §6930, parties handling certain quantities of hazardous wastes (these wastes are characterized and listed in regulations which were published in the Federal Register of May 19, 1980, 45 FR 33084 et seq. and July 16, 1980, 45 FR 47832 et seq.) are required to notify EPA of their activities. Facilities handling wastes defined by the May 19, 1980 regulations were required to notify by August 18, 1980. Facilities handling wastes defined by the July 16, 1980 regulations were required to notify by October 14, 1980. We have not yet received a notification from you or your company.

Section 3007 of RCRA, 42 U.S.C. §6927, allows EPA to request certain information of parties who handle hazardous wastes. Based upon information available to this Agency, we believe that you or your company handles such hazardous wastes. Therefore, in order to determine the extent of your hazardous waste activity, and to determine whether you should have notified EPA pursuant to §3010, we require that you answer the questions posed below. Your reply should be completed and signed by a responsible official of your firm and returned to us within 21 days of the date of this letter. If you have already notified EPA of your hazardous waste activity, please respond, indicating your prior notification and listing your EPA Identification Number, if available.

Please answer the following questions:

- 1) Do you handle any "hazardous wastes," as this term is defined in RCRA and the regulations promulgated under RCRA (regulations published in the Federal Register on May 19, 1980; July 16, 1980; October 30, 1980; November 12, 1980; November 17, 1980 and November 25, 1980)?
- 2) If you do handle such wastes, what is the greatest quantity of hazardous wastes that you handle in any one month?
- 3) If you do handle any hazardous wastes, please identify them by type, characteristics, components, or by the process that produces these wastes.
- 4) How do you handle these wastes (i.e. do you generate, transport, treat, store or dispose of them)?

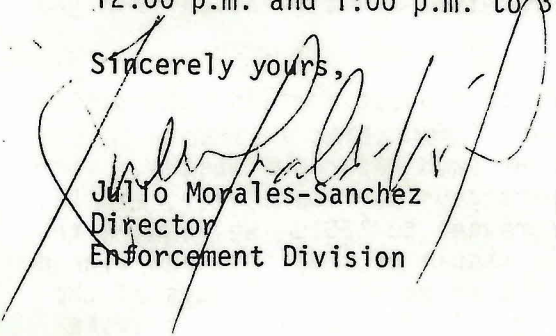
Your response to this letter should be sent to:

Permits Administration Branch
U.S. Environmental Protection Branch
Region II
26 Federal Plaza
New York, New York 10278

Your failure to respond to this letter in a timely manner may subject you to the initiation of enforcement action under Section 3008 of RCRA, 42 U.S.C §6928. Such enforcement action may include the assessment of substantial penalties for continued non-compliance.

Your response to this letter does not constitute notification under RCRA. Such notification must be made by filling out EPA Form 8700-12. If you need this form, please request it with your response. If you have any questions on the contents of this letter or desire a notification package, please contact the EPA Permits Administration Branch of 26 Federal Plaza, New York, New York 10278. Telephone calls to (212) 264-7306 may be made between the hours of 10:00 a.m. to 12:00 p.m. and 1:00 p.m. to 3:00 p.m., Monday through Friday.

Sincerely yours,


Julio Morales-Sanchez
Director
Enforcement Division



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

03D000692343

PAT PERRETTI FREIGHT SERVICE INC

335 BROWN TRAIL

HOPATCONG

NJ

07843

INSTALLATION ADDRESS

335 BROWN TRAIL

HOPATCONG

NJ

07843

RCRA INSPECTION FORM

Report Prepared for:

Generator ☐

Transporter ☒

HWM (TSD) facility ☐

Copy of report sent to the facility ☐

PAB
MAR 8 4 10 PM '83
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

4

Facility Information

Name: PAT Perretti Freight Service Inc.

Address: 335 Brow Trail
Hopatcong, N.J. 07843

EPA ID#: NJD0000692343

Date of Inspection: 1-12-83, Wednesday
and 1-25-83, Tuesday

Participating Personnel

State or EPA Personnel: Alphonse Fannuzzi Jr.
NJ DEP

Facility Personnel: PAT PERRETTI, owner

Report Prepared by Name: Alphonse Fannuzzi Jr.

Agency: DEP, DWM

Telephone #: 201-648-3669

Approved for the Director by: _____

Summary of Findings

Facility Description and Operations

PAT Perretti Freight (PPF) is a hazardous waste transporter that parks its trucks at 216 Patterson Plank Road Carlstadt, NJ. The address listed on PPF's transporter permit is Mr. P. Perretti's home and office in Hopatcong, NJ. The site where PPF presently parks its trucks is an abandoned hazardous waste facility, Scientific Chemical Processing Inc. ^(SCP) 216 Patterson Plank Rd. Carlstadt, NJ.

PPF started transporting haz. waste for SCP in 1980. This is how PPF got into the haz. waste transporting business.

The manifest discrepancies noted during the inspection were: 1) NJ0065508 (11/03/82), no net quantity indicated, 2) NJ0006340 (12/30/80), no TSD info or name and the transporter #1 name is in the wrong area. It appears that this material was sent to Chemical Waste Management, Alabama due to an Alabama manifest ^{on file} completed for the same day for the same quantity of waste. 3) NJ0086819 (3/17/82) transporter #1 signature was in the wrong area (there were several manifests with this same problem and this is a representative sample of these manifests). Mr. P. Perretti stated that NJDEP had notified PPF of manifest problems but he was not sure of which manifests they were for.

Inspector's Signature

Facility Operator's Signature

A OZF investigative report will be completed for these two visits to PPF. Detailed information about PPF's business will be noted in this report.

Transporter Inspection Report Form

40 CFR Part 263 Transporter Standards

YES NO N/A

263.10 - Does the transporter carry hazardous waste?

X _ _

263.12 - Does the transporter store hazardous waste at a transfer facility - if yes, how long?
10 days or less

_ X _

N/A more than 10 days (complete TSD form)

263.20 - Manifest System

1) Does the transporter have a copy for each manifest shipment of hazardous waste?

X _ _

2) Does a representative portion of the manifests show the following information (if no, circle the missing information)

_ X _

o Generator's name, address, telephone and EPA I.D. numbers, signature and date of signature

X _ _

o Transporter's name, EPA I.D. number, signature and date of signature

X _ _

NJ 0006340 (12/30/80) o TSD's name, address and EPA I.D. Number

_ X _

and either the signature and date of the TSD or the name, EPA I.D., signature and date of the next transporter.

X _ _

o Manifest Document number

X _ _

o Proper DOT shipping description

X _ _

NJ 00065508 (11/03/82) o Quantity & type of containers

_ X _

(If no, to any of the above obtain copies of incomplete manifests).

3) Based on available information, do all manifests conform to the hazardous waste shipments made? If no, explain

X _ _

262.22 - Have records been kept since November 19, 1980?

X _ _

263.30 - Has there ever been a spill or discharge of hazardous waste during transportation?

_ X _

If yes, was the incident report submitted to DOT? (obtain copy of the report)

_ _ X

263.31 - If there was any spill or discharge of hazardous waste, was it cleaned up? If no, explain.

N/A _ _ X

General Comments:

Copies of improperly completed manifests are attached to this report.

Please Print all information.

HAZARDOUS WASTE MANIFEST

NJ0065508

PART A: TRANSPORTER NO. 1'S COPY

DOCUMENT NO.

GENERATOR'S NAME INMONT CORPORATION	PHONE (INCLUDE AREA CODE) 1-201-356-1800	EPA ID NO. NJ000002
ADDRESS (STREET - CITY - STATE - ZIP CODE) L-5 FACTORY LANE Bound Brook NJ 08805		
TRANSPORTER NO. 1 DAT PERRETTI FREIGHT	PHONE (INCLUDE AREA CODE) 1-201-935-4361	EPA ID NO. NJ00000069
ADDRESS (STREET - CITY - STATE - ZIP CODE) 335 WOOD TRAIL HAPATCONG NJ 07843		
TRANSPORTER NO. 2 -	PHONE (INCLUDE AREA CODE) -	EPA ID NO. -
ADDRESS (STREET - CITY - STATE - ZIP CODE) -		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY FONDESSY/ACES	PHONE (INCLUDE AREA CODE) 419-726-1521	EPA ID NO. OH00045
SITE ADDRESS (STREET - CITY - STATE - ZIP CODE) 43616 BTLATER CREEK ROAD OREGON OHIO PCN# 0079A		

IF MORE THAN TWO TRANSPORTERS ARE TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE
THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS **NJ**

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	TYPE	EPA CODE
1. HAZARDOUS WASTE WASTE/MS	Pigment Solid	145 1181	2			1	55	1
2.								
3.								
4.								
5.								
6.								

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES IN SHIPMENT OR A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste. In permit to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Robert Carey</i>	ALSO PRINT SIGNATURE Robert Carey	TITLE Genl. Mgr.	DATE SHIPPED 11/03/82	EXPECTED AT 11/03/82
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT - ALSO PRINT SIGNATURE <i>Robert Allen</i>			TRANSPORTER NO. 1 SWA REGISTRATION NO. 21061	DATE RECEIVED 11/03/82

PART B: TRANSPORTER NO. 1'S COPY

PCN# 0079A

GENERATOR EPA ID NO.

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT - ALSO PRINT SIGNATURE <i>Robert Allen</i>	DATE DELIVERED 11/03/82
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT - ALSO PRINT SIGNATURE	DATE RECEIVED 11/03/82
TRANSPORTER NO. 2 SWA REGISTRATION NO.	DATE DELIVERED 11/03/82
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT - ALSO PRINT SIGNATURE	DATE RECEIVED 11/03/82
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS	HANDLING 1. 55 2. 1 3. 1
TSD FACILITY EPA ID NO. OH00045	
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE & CERTIFICATION OF RECEIPT OF SHIPMENT - ALSO PRINT SIGNATURE <i>Robert Allen</i>	DATE RECEIVED 11/03/82

See cover sheet for instructions.
Please TYPE all information.

DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS WASTE MANIFEST

NJ 0006340

PART A: TRANSPORTER NO. 2's COPY

DOCUMENT NO. NJ 0006340

GENERATOR NAME <u>Marisol Inc.</u>	PHONE (INCLUDE AREA CODE) <u>201-319-5101</u>	EPA ID NO. <u>ATIDUC12M</u>
ADDRESS (STREET, CITY, STATE, ZIP CODE) <u>Factory Lane, Monroesex, N.J. 08851</u>		
TRANSPORTER NO. 1 <u>Asst Leasing (Pat J. Prett)</u>	PHONE (INCLUDE AREA CODE) <u>201-319-5101</u>	EPA ID NO. <u>ATIDUC12M</u>
ADDRESS (STREET, CITY, STATE, ZIP CODE) <u>421 Warren St. - Jersey City</u>		
TRANSPORTER NO. 2	PHONE (INCLUDE AREA CODE)	EPA ID NO.
ADDRESS (STREET, CITY, STATE, ZIP CODE)		

TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY	PHONE (INCLUDE AREA CODE)	EPA ID NO.
SITE ADDRESS (STREET, CITY, STATE, ZIP CODE)		

IF MORE THAN TWO TRANSPORTERS ARE TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NJ 0006340

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	TYPE	EPA HAZ CODE	EPA WASTE TYPE
1. <u>Acetic Acid</u>	<u>3</u>	<u>1114</u>	<u>1</u>	<u>100 L</u>	<u>1</u>	<u>1</u>	<u>DRUM</u>	<u>3</u>	<u>1</u>
2. <u>Acetic Acid</u>	<u>3</u>	<u>1114</u>	<u>1</u>	<u>100 L</u>	<u>1</u>	<u>1</u>	<u>DRUM</u>	<u>3</u>	<u>1</u>
3. <u>Acetic Acid</u>	<u>3</u>	<u>1114</u>	<u>1</u>	<u>100 L</u>	<u>1</u>	<u>1</u>	<u>DRUM</u>	<u>3</u>	<u>1</u>
4. <u>Acetic Acid</u>	<u>3</u>	<u>1114</u>	<u>1</u>	<u>100 L</u>	<u>1</u>	<u>1</u>	<u>DRUM</u>	<u>3</u>	<u>1</u>
5. <u>Acetic Acid</u>	<u>3</u>	<u>1114</u>	<u>1</u>	<u>100 L</u>	<u>1</u>	<u>1</u>	<u>DRUM</u>	<u>3</u>	<u>1</u>
6. <u>Acetic Acid</u>	<u>3</u>	<u>1114</u>	<u>1</u>	<u>100 L</u>	<u>1</u>	<u>1</u>	<u>DRUM</u>	<u>3</u>	<u>1</u>

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <u>Pat J. Prett</u>	TITLE <u>Asst Leasing</u>	DATE SHIPPED MO. DAY YR. <u>12/30/80</u>	EXPECTED ARRIVAL DATE MO. DAY YR. <u>12/30/80</u>
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <u>Pat J. Prett</u>	TRANSPORTER NO. 1 VEHICLE ID NO. <u>123456789</u>	DATE RECEIVED MO. DAY YR. <u>12/30/80</u>	

Transporter #1 signature in wrong area

12/30/80

PART B: TRANSPORTER NO. 2's COPY

GENERATOR EPA ID NO. ATIDUC12M

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT <u>Pat J. Prett</u>	TRANSPORTER NO. 1 VEHICLE ID NO. <u>123456789</u>	DATE DELIVERED MO. DAY YR. <u>12/30/80</u>
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <u>Pat J. Prett</u>	TRANSPORTER NO. 2 VEHICLE ID NO. <u>123456789</u>	DATE RECEIVED MO. DAY YR. <u>12/30/80</u>
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT <u>Pat J. Prett</u>	TRANSPORTER NO. 2 VEHICLE ID NO. <u>123456789</u>	DATE DELIVERED MO. DAY YR. <u>12/30/80</u>
TREATMENT, STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS		HANDLING METHOD <u>1</u>

STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS WASTE MANIFEST

NJ0086819

Please TYPE all information.

PART A: TRANSPORTER NO. 1's COPY

DOCUMENT NO. NJ 0086819

GENERATOR NAME Marisol, Inc.	PHONE (INCLUDE AREA CODE) 201 261 1111	EPA ID NO. PA100000000
ADDRESS (STREET - CITY - STATE - ZIP CODE) 125 Factory Lane, Little Ferry, NJ 07643		
TRANSPORTER NO. 1 Peretti (A+S)	PHONE (INCLUDE AREA CODE) 201 261 1111	EPA ID NO. PA100000000
ADDRESS (STREET - CITY - STATE - ZIP CODE) 335 Brown Trail, Hopatcong, N.J. 07935		
TRANSPORTER NO. 2	PHONE (INCLUDE AREA CODE)	EPA ID NO.
ADDRESS (STREET - CITY - STATE - ZIP CODE)		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Peretti (A+S)	PHONE (INCLUDE AREA CODE)	EPA ID NO.
SITE ADDRESS (STREET - CITY - STATE - ZIP CODE) P.O. Box 55, Little Ferry, NJ 07643		

IF MORE THAN TWO TRANSPORTERS ARE TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE
THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NJ →

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	HAZARD	UNIT	NET WEIGHT	UNIT	CONTAINER	DATE	TIME
1. Acetone	3	1	1	100	1	1	10/10/93	10:30
2.								
3.								
4.								
5.								
6.								

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The waste above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE - ALSO PRINT SIGNATURE J. M. ...	TITLE Dispatcher	DATE SHIPPED 10/10/93 MO. DAY YEAR	EXPECTED ARRIVAL 10/13/93 MO. DAY YEAR
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT - ALSO PRINT SIGNATURE Robert Allen	TRANSPORTER NO. 1 SWA REGISTRATION NO. 51701671AD	DATE RECEIVED 10/13/93 MO. DAY YEAR	

Signature in wrong area (Transporter #1)

PART B: TRANSPORTER NO. 1's COPY

GENERATOR EPA ID NO. PA100000000

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT - ALSO PRINT SIGNATURE Robert Allen	TRANSPORTER NO. 1 SWA REGISTRATION NO. 51701671AD	DATE DELIVERED 10/13/93 MO. DAY YEAR
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT - ALSO PRINT SIGNATURE	TRANSPORTER NO. 2 SWA REGISTRATION NO.	DATE RECEIVED
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT - ALSO PRINT SIGNATURE		DATE DELIVERED
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS		HANDLING MATERIALS
TSD FACILITY EPA ID NO.		
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE & CERTIFICATION OF RECEIPT OF SHIPMENT - ALSO PRINT SIGNATURE		DATE RECEIVED